

## CITY OF BURBANK BUILDING & SAFETY DIVISION 150 N. Third Street, Burbank, CA 91502 818-238-5280

Account No.:	
BL	_

## **TOW TRUCK BUSINESS APPLICATION**

PLEASE PRINT		Date of Application			
Business Name			P	hone	
Business Address					
Mailing Address (if differen					
TYPE OF OWNERSHIP:					
☐ Sole Proprietor ☐ Corp	oration 🗆 Par	tnership 🗆 Limited Par	tnership 🗆 LLC 🗆	☐ Other	
For initial application or cha	inges, please pro	vide copy of new partner	ship agreement or a	rticles of incorporation	
Federal Tax ID Number		Start Date of	Business in Burbank	<b>(</b>	
Number of Employees					
Hours of operation:					
Description of services to be	e provided				
OWNER INFORMATION  Names and addresses of owners, partners, principals or officers (Complete separate Personal Information Form for each Principal):					
Name T	ïtle	Address, City, State, Zip		Phone	
For corporations, the name	and address of c	Address, City, State, Zip	ice of process:	Phone Phone	
Names and Address of Prop Name T		Lessor of the above Tow Address, City, State, Zip		(Provide copy of lease) Phone	
Name of Insurance Compan Name P	-	Address, City, State, Zip		Phone	
STORAGE LOT Provide information about to properly accommodate and		•	umber of disabled v	ehicles the applicant can	
	LOT ADDRESS		AVAILABLE AREA	NUMBER OF VEHICLES	

## DESCRIPTION OF TOW TRUCKS:

YEAR	MAKE	MODEL	COLOR	GVW	VIN #	LICENSE #
			-			

LIST OF TRUCK OPERATORS – EMPLOYEES AND INDEPENDENT CONTRACTORS (Each driver needs to complete a separate Driver Application form)

NAME	HOME ADDRESS	PHONE	DRIVER'S LICENSE

for the crime of perjury:	I hereby authorize the City of Burbank, its agents the truth of the statements set forth in this application. I hereby certify under penalty of perjury the false or withheld information is grounds for depict.	ation and the qualifications of the applican nat for foregoing information is true and o	t(s) for this license and permit. correct, and I understand any
	false or withheld information is grounds for denia for the crime of perjury: Signature of Owner	I and/or revocation of this business license Print Name	or permit and for prosecution  Date